SMALL PROCUREMENT CONTRACT COVER SHEET FOR \$25,000 OR LESS BUT GREATER THAN \$2,500

DHMH, Office of Procurement and Support Services (OPASS), Room 416, 201 W. Preston Street, Balto., MD 21201 (410) 767-5816 FAX (410) 333-5958 CHECK ITEMS OR FILL IN THE BLANKS, AS APPROPRIATE

SERVICE		HUMAN SERVICE					
PROCUREMENT METHOD		Solicitation #		DHMH/OPASS			
ADPICS Requisition #		FMIS Appropriation Code		M00			
SUBMITTING UNIT		FMIS Department Code		M			
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UNIT CONTRACT MONITOR		PHONE/FAX					
CONTRACTOR			SSN OR FEIN				
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General -	%	Federal - %	Special Funds - %	Reimbursa	able- %	Non Bud -	%
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PROCUREMENT PACKAGE SPECIFICATIONS

Submit Procurement Page to OPASS at the address provided above. The Procurement Package must be complete and organized according to the specifications provided herewith.

CHECK IF PRESENT/COMPLETED

Completed Cover Sheet	Fund Cert
Three Contracts** with original signatures of the Contractor	PRG Approval Form (If Applicable)
Three Copies of the Bid/Proposal	One Copy of Solicitation (Electronic Version also)
Three Copies of the Contract Affadavit	List of Potential Vendors to be Solicited (MBE's Identified)
Three Copies of the Sole Source Determination	
SBR Exemption (If Applicable)	

^{*}If multiple fund source, use Multiple Funding (PCA/AGY OBJ) Detail Form

I attest to the accuracy and completeness of this Procurement Package:

Type/Print Name of Procurement Coordinator-PHONE Signature	e of Procurement Coordinator/Date
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Attach a separate sheet for additional information as necessary. A letter acknowledging receipt of this package will be sent to the DHMH Procurement Coordinator .

DHMH/OPASS (09/2008)

^{**}A DHMH-3982 for all competitive sealed bid contracts, or a DHMH-4133 or a DHMH-3882 for either sole source contracts or competitive sealed proposals. If no contract is used, sufficient data for completion of a DHMH Purchase Order is required.